Form **990-PF**Department of the Tressury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2018

For	caler	ndar year 2018 or tax year beginning		, and ending	
Na	me o	foundation			A Employer identification number
<u>DEWA</u> YNE AND LINDA BRIDGES FAMILY					
_ I	UO	NDATION			47-3613767
Nu	mber a	and street (or P O box number if mail is not delivered to street	address)	Room/su	B receptione number
_1	<u> 52</u>	17 FLINT ST			913-213-5400
Cit	y or t	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pending, check here
_(OVE	RLAND PARK, KS 66221			
G	Check	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organizations, check here
		Final return	Amended return		2 5
_		Address change	Name change		Foreign organizations meeting the 85% test, check here and attach computation
H_	_	type of organization: X Section 501(c)(3) ex		Vo	E If private foundation status was terminated
L	Se		Other taxable private founda	tion _	under section 507(b)(1)(A), check here
I F	air ma	arket value of all assets at end of year J Accounti		Accrual	F If the foundation is in a 60-month termination
•		Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)(B), check here
_	<u></u> \$	190,648. (Part I, colun	nn (d) must be on cash basis	-)	
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investmen	
	1	necessarily equal the amounts in column (a))	expenses per books	income	income (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.	.	<u> </u>
,	2	Check If the foundation is not required to attach Sch B Interest on savings and temporary	<u> </u>		45 65 55 55
ĺ	3	cash investments	47.	4	47. STATEMENT 1
4	4	Dividends and interest from securities			<u> </u>
	5a	Gross rents			
	b	Net rental income or (loss)	, _k -		· · · · · · · · · · · · · · · · · · ·
9	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			<u> </u>
Revenue	_b	assets on line 6a	1		0.
É	7	Capital gain net income (from Part IV, line 2)			0
	8	Net short-term capital gain			
	9	Income modifications Gross sales less returns			
	Ι.	and allowances		-:	
	0	Gross profit or (loss)			OK.
	111	Other income		•	1
	12	Total. Add lines 1 through 11	100,047.	Δ	47.
	13	Compensation of officers, directors, trustees, etc	0.	-	0. 0. 0.
	14	Other employee salaries and wages			
	15	Pension plans, employee benefits			
o.	1400	Legal fees			NED W
e d	Ь	Accounting fees		/4	CENERAL
Ä	c	Other professional fees		RE	2 20:9
Š	17	Interest	_		21/2/2
and Administrative Expense	18	Taxes		10/ 1	
, tsic	19	Depreciation and depletion		[8]	OPEN
. <u>Ē</u>	20	Occupané		1 -	O
. P	21	Travel, conferences, and meetings			
and	22	Printing and publications			
ğ	23	Other expenses			
Operating	24	Total operating and administrative			
) Poe	4	expenses. Add lines 13 through 23	0.		0. 0. 0.
U	25	Contributions, gifts, grants paid	4,600.		4,600.
	26	Total expenses and disbursements.			
	 	Add lines:24 and 25	4,600.		0. 0. 4,600.
		Subtractine 26 from line 12:	05 445		
		Excess of evenue over expenses and disbursements	95,447.		17
		Net investment income (if negative, enter -0-)		4	47.
	I C	Adjusted net income (if negative, enter -0-)	ı		4 / •

Part II Balance Sheets Albert stabilities and marker in the extension (a) 800x balae (b) Fook Value (c) For Marker Value (For	m 99	90-PF (2018) FOUNDATION		47-	3613767 Page 2
Capti- non-interest-bearing Savings and temporary capts investments 95,201. 190,648. 190,648.			Bolongo Shoots Attached schedules and amounts in the description	Beginning of year	End o	f year
Sewings and temporary cash investments 95, 201. 190, 648. 190, 648. Sewings and temporary cash investments Sewings Sew	<u></u>	art	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable ► Less allowance for doubtful accounts ► A Pledges receivable ► Less allowance for doubtful accounts ► 5 Grants receivable 6 Receivables due from officers, directors, trustless, and other obsqualified persons 7 the reter in an excess 1 time reteries an excess 1 time reteries - componet bonds 1 time reteries - componet bon		1	Cash - non-interest-bearing			
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Receivables due from officers, directors, trustees, and other disqualified persons		5				
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Less allowance for doubtful accounts		7	_			'
a Investiones for safe or use 9		l ′				<u>* </u>
Prepade expenses and deferred charges						
b Investments - corporate stock c Investments - corporate stoc	ets	1 -			.	
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5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 190, 648.			·-			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 190, 648.						
	6	ota	i net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	oiumn (b), <u>ii</u> ne 30		Form 990-PF (2018)

FOUNDATION

	4	7	-3	6	1	3	7	6	7	
--	---	---	----	---	---	---	---	---	---	--

Part IV Capital Gains and	l Losses for Tax on I	nvestmen	t Income					
(a) List and describe the k 2-story brick wareho	und(s) of property sold (for ex use; or common stock, 200 sl	ample, real esta hs. MLC Co.)	ite,	(b) D	How ac - Purc - Dona	nase i	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				ļ				
b NONE				<u> </u>	_			
<u>c</u>		<u> </u>		-	_			
<u>d</u>		<u></u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			ı	(h) Gain or (loss ((e) plus (f) minus	
a				_				
b						-		
<u>c</u>		 			-			
e e	<u></u>			_				
Complete only for assets showing ga	ın ın column (h) and owned by	the foundation	n on 12/31/69.		_		Gains (Col. (h) gair	n minus
	(j) Adjusted basis	1	cess of col. (i)			col.	(k), but not less tha	ın -0-) or
(i) FMV as of 12/31/69	as of 12/31/69		col. (j), if any				Losses (from col.	(n))
a								
b								
С								
d								
e								
2 Capital gain net income or (net capital	loss) $\begin{cases} If gain, also entermined \\ If (loss), entermined \end{cases}$			}	2			
3 Net short-term capital gain or (loss) as		and (6):		٦				
If gain, also enter in Part I, line 8, colu	mn (c).			 	,			
If (loss), enter -0- in Part I, line 8 Part V Qualification Under	er Section 4940(e) fo	r Reduced	Tax on Net	Inv	estm	ent Inc	ome	
If section 4940(d)(2) applies, leave this pa Was the foundation liable for the section 4 If "Yes," the foundation doesn't qualify uni	1942 tax on the distributable a der section 4940(e). Do not co	mplete this par	t					Yes X No
Enter the appropriate amount in each (a)		instructions be	fore making any e				T	(4)
Base period years Calendar year (or tax year beginning in	Adjusted qualifying di		Net value of no	(c) ncha	rıtable-		(col. (b) dr	(d) button ratio vided by col. (c))
2017		4,000.			9	0,118	•	.044386
2016							-	
<u>2015</u> 2014								
2013								
2 Total of line 1, column (d)							2	.044386
3 Average distribution ratio for the 5-year	r base period - divide the total	l on line 2 by 5.	0, or by the numb	er of	years			
the foundation has been in existence if	less than 5 years						3	.044386
4 Enter the net value of noncharitable-us	e assets for 2018 from Part X	, line 5					4	
5 Multiply line 4 by line 3							5	0.
6 Enter 1% of net investment income (1	% of Part I, line 27b)						6	0.
7 Add lines 5 and 6							7	0.
8 Enter qualifying distributions from Par If line 8 is equal to or greater than line		e 1b, and comp	olete that part usin	g a 1'	% tax r	ate.	8	4,600.
See the Part VI instructions.							-	Form 990-PF (2018)

DEWAYNE AND LINDA BRIDGES FAMILY

	n 990-PF (2018) FOUNDATION art VI Excise Tax Based on Investment Income (Section 494	 Ю(а),	49	940(b), 4940(e), o			3613 see i			Page 4 1 S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	enter "N/	/A"	on line 1.					·	Ī	
	Date of ruling or determination letter: (attach copy of letter if nec	cessary	y-sı	ee instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here					1				1.	
	of Part I, line 27b						· -				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49	% of Pa	art I	I, line 12, col. (b).	ŀ						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or					2				0.	
	Add lines 1 and 2			,	Ī	3				1.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	others, e	ent	ter -0-)		4				0.	
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			•	ſ	5				<u>1.</u>	
	Credits/Payments:				Ì						
а	2018 estimated tax payments and 2017 overpayment credited to 2018	6a		1	0.					- 1	
	Exempt foreign organizations - tax withheld at source	6b	Ť		0.					İ	
	• Tax paid with application for extension of time to file (Form 8868)	6c	Ť		1.						
	Backup withholding erroneously withheld	6d	Ť		0.	i					
	Total credits and payments. Add lines 6a through 6d					7				1.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached			Ì	8				0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			ı	▶	9				0.	
				ĺ	▶	10					
	Enter the amount of line 10 to be: Credited to 2019 estimated tax			Refunded	▶	11					
	art VII-A\ Statements Regarding Activities						.='-				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation o	or (did it participate or interv	ene	in			Yes	No	
	any political campaign?							1a		X	
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? Se	ee	the instructions for the d	lefını	tion		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies								,		
	distributed by the foundation in connection with the activities.			•							
c	Did the foundation file Form 1120-POL for this year?							10		X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year:								<u> </u>	
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers	s. > \$	S _	(0.				'	.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend										
	managers. ► \$ 0.										
2	Has the foundation engaged in any activities that have not previously been reported to the I	IRS?						2		X	
	If "Yes," attach a detailed description of the activities.										
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrum	пеп	nt, articles of incorporation	n, o	r]	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes							3		<u>X</u>	
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?						4a		<u>X</u> _	
b	o If "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year's	?						5		<u>X</u>	
	If "Yes," attach the statement required by General Instruction T.]		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ether:								ļ	
	By language in the governing instrument, or									İ	
	By state legislation that effectively amends the governing instrument so that no mandator	ry direct	tioi	ns that conflict with the s	state	law					
	remain in the governing instrument?							6		X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	plete Pa	art I	II, col. (c), and Part XV				7	X		
										'	
8a	f a Enter the states to which the foundation reports or with which it is registered. See instruction	ons. 🕨									
	KS								•]	
b	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	y G	eneral (or designate)							
	of each state as required by General Instruction G? If "No," attach explanation							8b	X		
9	· · · · · · · · · · · · · · · · · · ·				caler	ndar					1
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. Jf "Yes," com	nplete P	Part	t XIV				9		<u>X</u>	L
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listing	g th	eir names and addresses	S	<u>TMT</u>		10	X		
							For	m 99 0	-PF	(2018)	

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Pa	art.VII-A Statements Regarding Activities (continued)			
_	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14	The books are in care of ▶ DEWAYNE BRIDGES Telephone no. ▶ 913-21		<u>400</u>	
	Located at ► 15217 FLINT ST, OVERLAND PARK, KS ZIP+4 ►66	<u> 221</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	·L
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16_		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
D-	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required	ı		!
Ŗä			Yes	NIO
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
12	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			İ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		,	. [
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			}
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			' l
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	<u> </u>	
	Organizations relying on a current notice regarding disaster assistance, check here			1
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018? Yes X No			
	If "Yes," list the years >			1
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	_2b_		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			li
_	during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	25		
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a		
D	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
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Part VII-B. Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:	= -			Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	Ye	s X No [- :		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			ľ	ļ, (
any voter registration drive?		Ye	s X No	ı	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	X Ye	s Mo		<u> </u>
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				1
4945(d)(4)(A)? See instructions		Ye	s X No		,
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		·	,	1. 1
the prevention of cruelty to children or animals?			s X No		<u> </u>
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		n Regulations			لــــا.
section 53.4945 or in a current notice regarding disaster assistance? See instr			, l	5b X	
Organizations relying on a current notice regarding disaster assistance, check			▶ □	'	1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				١,	
expenditure responsibility for the grant?	Ŋ	I/A	s L No	1	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				Ι;	i i
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	[1]		ļ.
a personal benefit contract?		Ye	s X No		<u>'</u>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		F	6b /	X .
If "Yes" to 6b, file Form 8870.	.hltt		s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y 6	-	76	 '
b If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/A	7b .	 -
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	s 1,000,000 in remuneration of		s X No .	'	
excess parachute payment(s) during the year? Part VIIII Information About Officers, Directors, Trust	ees Foundation Ma			<u> </u>	1
Paid Employees, and Contractors	ccs, i culturation in	inagers, riiging	•		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ex	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account	i, other inces
DEWAYNE BRIDGES	TRUSTEE				
15217 FLINT ST		•			
OVERLAND PARK, KS 66221	0.00	0.	0.		0.
LINDA BRIDGES	TRUSTEE				
15217 FLINT ST					
OVERLAND PARK, KS 66221	0.00	0.	0.		0.
				Ì	
O Company of the bighest and amplement (ather them them in	luded on line 4) 16 none	anton IINONE II			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE."	(d) Contributions to employee benefit plans	(e) Ex	nense
(a) Name and address of each employee paid more than \$50,000	l `hours per week	(c) Compensation	and deferred	account	t, other
NONE	devoted to position		compensation	allowa	111062
NONE					
					
				 	
		-			
		-			
Total number of other employees paid over \$50,000	<u> </u>		▶ 1	·	0
7777		·	Form	990-PF	

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		· · · · · · · ·
Total number of others receiving over \$50,000 for professional services	>	
Part IX-A: Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
N/A		
	7	
	ا	
	_	
	_	
<u> </u>	_	
	_	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
N/A		
	-	
	+	
	-	
· · · · · · · · · · · · · · · · · · ·	_	
All the control of th	 	
All other program-related investments. See instructions.		
	\dashv	
	\dashv	
<u> </u>	\dashv	
	\dashv	•
	\dashv	
	1	
otal. Add lines 1 through 3	.	0.

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Part X Minimum Investment Return (All domesti	c foundations must complete this part. Foreign	foundations, see ii	nstructions)
1 Fair market value of assets not used (or held for use) directly in carr	ying out charitable, etc., purposes:		
a Average monthly fair market value of securities		1a	0.
b Average of monthly cash balances		1b	
c Fair market value of all other assets		1c	_
d Total (add lines 1a, b, and c)		1d	0.
e Reduction claimed for blockage or other factors reported on lines 1	a and		 -
1c (attach detailed explanation)	1e	0.	
2 Acquisition indebtedness applicable to line 1 assets		2	0.
3 Subtract line 2 from line 1d		3	0.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (fo	or greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3.	Enter here and on Part V, line 4	5	0.
6 Minimum investment return Enter 5% of line 5	ŕ	6	0.
Part XI Distributable Amount (see instructions) (Sec foreign organizations, check here ▶ ☐ and do not c	ction 4942(j)(3) and (j)(5) private operating foundatio omplete this part.)	ns and certain	
1 Minimum investment return from Part X, line 6		1	0.
2a Tax on investment income for 2018 from Part VI, line 5	2a	<u>1.</u>	
b Income tax for 2018. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	1.
3 Distributable amount before adjustments. Subtract line 2c from line	1	3	0.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	0.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter	here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish ch	naritable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), lir	ne 26	1a	4,600.
b Program-related investments - total from Part IX-B		1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in call	rrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		<u> </u>	
a Suitability test (prior IRS approval required)		3a	
b Cash distribution test (attach the required schedule)		3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and o	n Part V, line 8; and Part XIII, line 4	4	4,600.
5 Foundations that qualify under section 4940(e) for the reduced rate	of tax on net investment		
income. Enter 1% of Part I, line 27b		5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	4,600.
Note: The amount on line 6 will be used in Part V, column (b), in su	bsequent years when calculating whether the foundar	tion qualifies for the s	ection

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4940(e) reduction of tax in those years.

FOUNDATION

Part XIII.	Undistributed	Income	(see instructions)
------------	---------------	--------	--------------------

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				0
line 7				0.
2 Undistributed income, if any, as of the end of 2018			505.	
a Enter amount for 2017 only	+			•
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:	- · · · -	<u></u>	· · · · · · · · · · · · · · · · · · ·	
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			-
4 Qualifying distributions for 2018 from				
Part XII, line 4: > \$ 4,600.				:
a Applied to 2017, but not more than line 2a			505.	
b Applied to undistributed income of prior				<u>.</u>
1		0.		·
years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)	0.			•
· · · · · · · · · · · · · · · · · · ·		<u></u> .	-	0.
d Applied to 2018 distributable amount	4,095.			
e Remaining amount distributed out of corpus	<u>4,095.</u>			0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	4 005			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,095.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	•			, ,
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	4,095.		_	
0 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018 4,095.				

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DEWAYNE AND LINDA BRIDGES FAMILY 47-3613767 Page Form 990-PF (2018) FOUNDATION Part XIV, Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (e) Total (a) 2018 (b) 2017 (c) 2016 (d) 2015income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(8)(i)b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 of more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV : Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) DEWAYNE BRIDGES b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum \textbf{X} \) If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2018) ' FOUNDATION

47-3613767

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to **Amount** contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CITY UNION MISSION CHARITABLE GENERAL USE 1100 EAST 11TH STREET 200. KANSAS CITY, MO 64106 ALZHEIMER'S ASSOCATION CHARITABLE GENERAL USE 225 NORTH MICHIGAN AVENUE SUITE 1700 200. CHICAGO, IL 60601 KANSAS CITY RESCUE MISSION CHARITABLE GENERAL USE 1520 CHERRY STREET KANSAS CITY, MO 64108 200. -FATHER FLANAGANS BOYS HOME -BOYS CHARITABLE GENERAL USE 14100 CRAWFORD ST 200. BOYS TOWN NE 68010 LEUKEMIA & LYMPHOMA SOCIET CHARITABLE GENERAL USE 3 INTERNATIONAL DRIVE SUITE 200 200. RYE BROOKE NY 10573 SEE CONTINUATION SHEET(S) ▶ 3a Total 4,600. b Approved for future payment NONE Total

823611 12-11-18

Supplementary Information Part XV Grant's and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor TOYS FOR TOTS CHARITABLE GENERAL USE 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172 200. WAYSIDE WAIFS CHARITABLE GENERAL USE 3901 MARTHA TRUMAN RD 200, KANSAS CITY, MO 64137 CHARITABLE SCHOLARSHIP BASED ON JESSICA T HOCNANADEL INDIVIDUAL'S ABILITY TO DEMONSTRATE ACADEMIC ACHIEVEMENT, FINANCIAL NEED, AND AN 2,500. OLATHE BIBLE CHURCH CHARITABLE GENERAL USE 13700 W 151ST ST, OLATHE OLATHE KS 66062 500. VETERANS OF FOREIGN WARS FOUNDATION CHARITABLE GENERAL USE 406 W. 34TH STREET SUITE 920 200, KANSAS CITY, MO 64111 Total from continuation sheets 3 600

DEWAYNE AND LINDA BRIDGES FAMILY

FOUNDATION	<u>47-3613767</u>
Part XV Supplementary Information	
3a Grant's and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - JESSICA T HOCNANADEL	
SCHOLARSHIP BASED ON INDIVIDUAL'S ABILITY TO DEMONSTRATE A	ACADEMIC
ACHIEVEMENT, FINANCIAL NEED, AND AN EXPRESS INTEREST IN PU	JRSUING A
DEGREE IN BUSINESS OR ENTREPRENEURIAL BUSINESS.	
	
 	
	-
·	
	-
	

Form 990-PF (2018) *

FOUNDATION

Part XVI-A	 Analysis of 	Income-Producing	Activities
------------	---------------------------------	-------------------------	-------------------

inter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Turicuon income
a	-				
b			+ +	-	
C			+		
d	-		-		
e	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	47.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					<u></u>
a Debt-financed property					. <u></u>
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					_
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b	_				
C					
d	_				
e	-		\bot		
2 Subtotal. Add columns (b), (d), and (e)).		0.
3 Total. Add line 12, columns (b), (d), and (e)				13	47.
See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B | Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).					

Form **990-PF** (2018)

Pa	irt XVII	Information Re Exempt Organ		fers to a	nd Transactions a	and Relations	hips With Nonc	haritable	•	
1	Did the or			f the followin	g with any other organizat	ion described in sec	tion 501(c)		Yes	No
		=			to political organizations					
а	•	from the reporting founda	•	_						
	(1) Cash							1a(1)		Х
	(2) Other	r assets						1a(2)		Х
b	Other tran								-	
	(1) Sales	of assets to a noncharital	ble exempt organization	on				1b(1)		X
	(2) Purci	hases of assets from a no	ncharitable exempt or	ganization				1b(2)		X
	(3) Renta	al of facilities, equipment,	or other assets					1b(3)		X
	(4) Reim	bursement arrangements						1b(4)		X
	(5) Loan	s or loan guarantees						1b(5)		X
	(6) Perfo	ormance of services or me	mbership or fundraisi	ng solicitatio	ns			1b(6)		X
	•	f facilities, equipment, ma	• .		•			1c		X
d	or service	·-	oundation. If the found	lation receive	dule. Column (b) should a ed less than fair market val	-	=		sets,	
(a)	`	<u> </u>	,		exempt organization	(d) Description	n of transfers, transactions,	and sharing ar	rangeme	nte
(4)-		(b) / intodire involved	(o) Namo or n		exempt organization	(u) Description	in or transfers, transactions,	and snamy a	angeme	1113
				N/A						
			-							
	ĺ									
										
				•	.					
	ın section	501(c) (other than sectio	n 501(c)(3)) or in sect		or more tax-exempt orgar	iizations described		Yes	X] No
					(b) Type of organization		(c) Description of relati	onship		
		N/A								
Siç He	gn and be	elief it is true, correct, and con	nplete Declaration of prep	return, including arer (other than	taxpayer) is based on all inform	TRUST	er has any knowledge	May the IRS return with th shown below	? See in:	this er str
				Predarada di	Date '	Title Date	Check I if P1	IN		
De	id			ととと	Ah_{A}	11111110	self- employed		100	
	Under penalties of payury, I declare that I have examined this return, including and belief it is true, sorrect, and complete Declaration of preparer (other than			1411111		200546		_		
	-				<u> </u>		Firm's EIN ► 46 -	<u>-T</u> 70T0	44	
					Phone no. 913	213-5	400			

Form **990-PF** (2018)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

DEWAYNE AND LINDA BRIDGES FAMILY

FOUNDATION

OMB No 1545 0047

2018

Employer identification number

47-3613767

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Organization ty	rpe (check one)·
Filers of:	Section:
Form 990 or 990	D-EZ 501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
=	ganization is covered by the General Rule or a Special Rule . ction 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General Rule	
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or ty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions
Special Rules	
section any on	organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under as 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from e contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; orm 990-EZ, line 1. Complete Parts I and II.
year, to	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the otal contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the tion of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), III.
year, c is chec purpos	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box isked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., see Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively is, charitable, etc., contributions totaling \$5,000 or more during the year.
but it must ansi	panization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), wer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

DEWAYNE AND LINDA BRIDGES FAMILY

FOUNDATION

47	-3	61	37	67	

Employer identification number

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed. (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution \mathbf{x} 1 DEWAYNE BRIDGES Person Payroll 50,000. Noncash 15217 FLINT ST (Complete Part II for OVERLAND PARK, KS 66208 noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 LINDA BRIDGES LXJ Person **Payroll** 15217 FLINT ST 50,000. Noncash (Complete Part II for OVERLAND PARK, KS 66208 noncash contributions) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions)

Name of organization
DEWAYNE AND LINDA BRIDGES FAMILY
FOUNDATION

Employer identification number

47-3613767

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
· ·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization **Employer identification number** DEWAYNE AND LINDA BRIDGES FAMILY 47-3613767 FOUNDATION Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enterthis info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERES	ON SAVINGS	AND TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE		(A) REVENUE PER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
CENTRAL BANK OF THE I	MIDWEST	47.		47.		47.
TOTAL TO PART I, LIN	± 3	47.		47.		47.
FORM 990-PF		OTHER FUNDS			STATEMENT	2
DESCRIPTION			В	(A) EGINNING OF YEAR	(B) END OF YEAR	
CENTRAL BANK OF THE I	MIDWEST			95,201.	190,6	48.
TOTAL TO FORM 990-PF	, PART II, L	INE 29		95,201.	190,6	48.
FORM 990-PF		BSTANTIAL CONTI VII-A, LINE 10		ORS	STATEMENT	3
NAME OF CONTRIBUTOR		ADDRESS				
DEWAYNE BRIDGES		15217 FLINGOVERLAND PA		KS 66221		
LINDA BRIDGES		15217 FLIN	r st			

OVERLAND PARK, KS 66221